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UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorne	y Docket i	No.	MP0147.D1
First In	ventor	Erar	n Rotem
Title	FLIP CH	IIP WI	TH NOVEL POWER AND GROUND ARRANGEMENT

l	PATENT APPLICATION				First Inventor Eran Rotem						
	1		NSMITTA			Title	FLIP C	HIP WITH	NOVEL POWER	AND GROUND ARRANGE	MENT
ţ	(Only for n	new nonprovisiona	al applications und	ter 37 C.F.R.	1.53(b))	Expres	s Mail Lai	bel No.	EV 092 055 921	US	
	See MPEP o		ICATION EL			A	DDRE	SS TO	Commission P.O. Box 1	Patent Application oner for Patents 1450 1, VA 22313-1450	
1.						9 10 11 12 13 14	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATIONS PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R.§3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.				
	or in an App Conti Prior app For CONTIN under Box 5	olication Data Sh nuation olication informati IUATION or DIVI 5b, is considered	eet under 37 CF ☑ Divisional on: Exami SIONAL APPS on I a part of the dis	R 1.76: ☐ Continer Huynh, Anly: The enting closure of the hen a portion	nuation-in-pa ndy e disclosure e accompar n has been i	of the nying o	prior app r division tently om	of polication, all application	orior application No Group / Art Un from which an o		ied
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ŀ	☑ Custon	ner Number or Ba		(Insert Custo			ar code la	abel here)		orrespondence address belo	
	Name	Marvell Semi	conductor, Inc.								
ŀ	700 First Avenue										
ļ		Mail Stop 509									
	City	Sunnyvale			State	CA			Zip Code	94089	
Ĺ	Country	United States		Teleph	one	408	-222-250	00	Fax	408-752-9034	
	Name (Pri	int/Type)	Michael D. Wi			Regi	stration N	Vo. (Atto	mey/Agent)	34,754	
	Signature Qual Olivers				Date January 27, 2004						



PTO/SB/17 (01-03)

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CEE TO ANOMITTAL	Complete if Known				
FEE TRANSMITTAL	Application Number	To Be Assgined			
for FY 2004	Filing Date	Herewith			
	First Named Inventor	Rotem, Eran			
Patent fees are subject to annual revision.	Examiner Name	To Be Assigned			
Applicant claims small entity status. See 37 CFR 1.27	Group / Art Unit	To Be Assigned			
TOTAL AMOUNT OF PAYMENT (\$) 770	Attorney Docket No.	MP0147.D1			

METHOD OF PAYMENT (check all that apply)					FEE CALCULATION (continued)					
☐ Check ☑ Credit card ☐ Money ☐ Other ☐ None					3. ADDITIONAL FEES Large Entity Small Entity					
Order Deposit Account:					Large	Entity	Small E	ntity		
Deposit Account.					Fee	Fee	Fee	Fee	Fee Description	Fee Pald
Deposit					Code 1051	(\$) 130	Code 2051	(\$) 65	Surcharge - late filing fee or oath	
Account 08-0/50					1051	50	2052	25	Surcharge - late filing fee or oath Surcharge - late provisional filing fee	ļ
Number	<u> </u>				1032	30	2032	23	or cover sheet.	
Deposit					1053	130	1053	130	Non-English specification	
Account	Harness, Dicker	y & Pierce, P.L.C.			1812	2,520	1812	2,520	For filing a request for reexamination	
Name					1804	920*	1804	920*	Requesting publication of SIR prior to	
The Commission	er is authorized	d to: (check all that app	nly)						Examiner action	
		Credit any overpay uring the pendency of the		1	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
		except for the filing fe	e		1251	110	2251	55	Extension for reply within first month	
to the above-ident					1252	420	2252	210	Extension for reply within second	
	FEE CA	ALCULATION							month	<u></u>
 BASIC FIL 	ING FEE	. , . ,			1253	950	2253	475	Extension for reply within third month	
Large Entity	Small Entity				1254	1,480	2254	740	Extension for reply within fourth month	
		Fee Description			1255	2,010	2255	1,005	Extension for reply within fifth month	
	Code (\$)		Fee Paid	٦ I	1401	330	2401	165	Notice of Appeal	
		Utility filing fee	770	-l l	1402	330	2402	165	Filing a brief in support of an appeal	
		Design filing fee	ļ	-l	1403	290	2403	145	Request for oral hearing	
		Plant filing fee		- 1					Petition to institute a public use	
				1	1451	1,510	1451	1,510	proceeding	
100 100 200 00 1 10 10 10 10 10 10 10 10 10 10 10					1452	110	2452	55	Petition to revive – unavoidable	
	SUBTOTAL	_ (1)	(\$) 770]	1453	1,330	2453	665	Petition to revive – unintentional	
2. EXTRA CLAIM	1 FFFS			_	1501	1,330	2501	665	Utility issue fee (or reissue)	
2. EXTITA OFAIII		Extra Fee from	Fee		1502	480	2502	240	Design issue fee	\vdash
		Claims below	Paid	_	1503	640	2503	320	Plant issue fee	
Total Claims 8	-20 ** = [0 X 18] = [0]	1460 1807	130 50	1460	130	Petitions to the Commissioner	. ——
Independent Claims 1	-3 ** =	0 X 86	= 0		1007	30	1807	50	Processing fee under 37 CFR 1.17 (q	'⊢—
Multiple				╣╏	1806	180·	1806	180	Submission of Information Disclosure Stmt	
Dependent		x	= 0	Ji	8021	40	8021	40	Recording each patent assignment	
Large Entity	Small Entity				0021	40	0021	40	per property (times number of properties)	
Fee Fee	Fee Fee				1809	770	2809	385	Filing a submission after final rejection	,
Code (\$)	Code (\$)	Fee Description							(37 CFR § 1.129(a))	
1202 18				1810	770	2810	385	For each additional invention to be		
	86 2201 43 Independent claims in excess of 3								examined (37 CFR § 1.129(b))	
1203 290	2203 145				1801	770	2801	385	Request for Continued Examination (RCE)	
1204 86	2204 43	** Reissue independe original patent	ent claims over		1802	900	1802	900	Request for expedited examination	
** Poincup claims in excess of 20 and			_{nd}	-	. •			of a design application		
1205 18 2205 9 Reissue claims in excess of 20 and over original patent										
·					Other fe	e (specit	fy)			
SUBTOTAL (2) (\$) 0										
					*Reduc	ed by Ba	asic Filing	Fee Pa	id SUBTOTAL (3) (\$) 0	
**or number previously paid, if greater; For Reissues, see above										

SUBMITTED BY				C	omplete (if applicable)	
Name (Print/Type)	Michael D. Wiggins	Registration No. Attorney/Agent)	34,754	Telephone	248-641-1600	
Signature	Membel DW	man		Date	January 27, 2004	